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**APPLICANTS**

Timothy M. Shanley, Orange, CT;  
 Robert W. Hamlin, Monroe, CT;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 55	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

**ADDRESS**

Gordon & Jacobson, P.C.  
 65 Woods End Road  
 Stamford, CT 06905

**TITLE**

Methods and apparatus for controlling the flow of multiple signal sources over a single full duplex ethernet link

<b>FILING FEE RECEIVED</b> 829	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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